

**CHARLES COUNTY DEPARTMENT OF HEALTH  
DIVISION OF ENVIRONMENTAL HEALTH  
PO BOX 1050  
WHITE PLAINS, MARYLAND 20695  
Phone 301-609-6751 Fax 301-609-6684**

**BAY RESTORATION FUND GRANT APPLICATION CHECKLIST  
Connection to Sewer in non-Priority Funded Areas- FY23**

Applicant Name: \_\_\_\_\_ Property ID# \_\_\_\_\_

Phone Number: \_\_\_\_\_ Date Package submitted: \_\_\_\_\_

Address: \_\_\_\_\_

Please submit the items below together as soon as possible as **one package**.

- BRF Application
- Last Federal tax return to verify income (**First two pages only**)
- Site Plan. (Showing connection from cleanout to house) (Contact Town/County about this, depending on where you live)
- **Connection fees/Major Facility Fee amount from Charles County Government or Town of La Plata**
- **3 Bids from different contractors to connect sewer line from cleanout to house. The bids need to include the Company name, address, and contact information. The bids will also need to include the property owners name and complete address, and what is included with the sewer connection (i.e. Sewer Connection fees, septic tank pumping and abandonment, etc.)**
  - Bid #1 \_\_\_\_\_
  - Bid #2 \_\_\_\_\_
  - Bid #3 \_\_\_\_\_

Charles County Department of Health will need to submit the following to Maryland Department of the Environment for approval: (This process can and has taken a long time)

- A Consideration of BRF Funding letter will be sent to MDE for approval to use BRF funds to connection to public sewer

If approval is granted the homeowner will need to contact the contractor with the lowest bid and the work can begin. Once the sewer connection has been inspected by the Town/County, and the septic tank has been abandoned, crushed, and filled the following will need to be submitted to the Health Department. Please contact the Health Department about inspecting the abandoned and crushed septic tank.

- Letter from homeowner stating satisfactory install of sewer connection
- Letter/Inspection sheet from Town/County about sewer connection
- Contractor Invoice

<b>SEWER CONNECTION</b> (existing business w/ failing system Small Business Vendor-eMMA <b>ONLY</b>  <b>Max :\$18,750</b> Lowest Bid x 75%= Grant Amount  _____ x .75= _____
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**PLEASE KEEP THIS OR MAKE A COPY FOR YOUR RECORDS**

**CHARLES COUNTY DEPARTMENT OF HEALTH  
DIVISION OF ENVIRONMENTAL HEALTH  
4545 CRAIN HIGHWAY, PO BOX 1050  
WHITE PLAINS, MARYLAND 20695**

**BAY RESTORATION GRANT APPLICATION  
NITROGEN-REDUCING PRETREATMENT UNIT**

*This application is designed to aid in determining your eligibility. Submit completed applications to the address above.*

<b><u>BUILDING</u></b>	<b><u>TYPE</u></b>	<b><u>BAT Funding Eligibility for Type of Property</u></b>	<b><u>WATER SUPPLY</u></b>
A: <input type="checkbox"/> Existing Home: B: <input type="checkbox"/> Existing Business C: <input type="checkbox"/> Existing Non-profit	<input type="checkbox"/> Repair <input type="checkbox"/> Upgrade <input checked="" type="checkbox"/> <b><u>Sewer connection</u></b>	<input type="checkbox"/> A: 100% (up to \$25,000, if Income < \$300K (Check line 22 Form 1040/Keep copy in file) OR allow only 50% <input type="checkbox"/> B: 50% of the cost up to \$12,500. <input type="checkbox"/> C: 100% of the cost up to \$25,000.  Existing homes/businesses owned by a business will only receive 50% of the costs of sewer connection up to \$12,500.	<input type="checkbox"/> Existing Water Tag # _____  <input type="checkbox"/> Public Water
<b>If income is more than \$300,000 only 50% of the sewer connection up to \$12,500 is eligible for BRF Funding</b>			

1. OWNER \_\_\_\_\_ ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_  
PHONE NUMBER (HOME) \_\_\_\_\_ WORK \_\_\_\_\_  
SOCIAL SECURITY NUMBER # (Required For Payment Purposes) \_\_\_\_\_

2. BUILDING ADDRESS \_\_\_\_\_  
(House Number, Street, City)

3. PROPERTY TAX ACCOUNT NUMBER \_\_\_\_\_

4. SUBDIVISION \_\_\_\_\_ LOT NUMBER \_\_\_\_\_ TAX MAP \_\_\_\_\_ PARCEL \_\_\_\_\_

**\*\* DESCRIBE ANY PROBLEMS WITH YOUR EXISTING SYSTEM \*\***

5. LOT LOCATED WITHIN CHESAPEAKE BAY CRITICAL AREA: YES \_\_\_\_\_ NO \_\_\_\_\_ UNKNOWN \_\_\_\_\_

6. NUMBER OF BEDROOMS: \_\_\_\_\_

NAME, MAILING ADDRESS AND PHONE NUMBER OF APPLICANT:

**ATTACH A SITE PLAN SHOWING THE SIZE AND SHAPE OF THE PROPERTY, HOUSE LOCATION, WELL AND SEPTIC SYSTEM ON THE PROPERTY.**

*The applicant hereby certifies and agrees that:*

(1) the applicant is authorized to make the application; (2) the information is correct; (3) the applicant will comply with all regulations of Charles County which are applicable hereto; (4) the applicant will perform no work on the above property not specifically described in this application; (5) the applicant grants County officials and approved contractors the right to enter onto the property for the purpose of inspecting the work permitted, posting notices, and performing 5-year maintenance and sampling.

SIGNED \_\_\_\_\_ DATE \_\_\_\_\_

## **Instructions for Completing the Bay Restoration Grant Application for Sewer Connection in a PFA Area.**

The following are instructions for completing an application to upgrade existing septic systems with nitrogen reducing pretreatment units. The information listed below corresponds to the items listed on the Bay Restoration Grant Application.

Building: Indicate the type of building on the property.  
Type: Indicate the type of septic system project for the property.  
Water Supply: Indicate the type of water supply on the property.

Item 1: List the property owner's name and mailing address including the street address, city, state, and zip code. Also include the home and work telephone numbers for the property owner.

Item 2: List the building address of the property, including the house number, street name, and city.

Item 3: Transfer the 12-digit tax account number from the corresponding County property tax bill.

### **1) Applicant Information:**

Applicant must sign the application and agree to the terms of the application. Provide name, mailing address and phone number of the applicant in the box provided.

### **2) Site Plan:**

Submit a site plan showing the size and shape of the property, house location, well and septic system on the property, property lines, rights of way, easements, and existing improvements such as decks, garages, sheds and swimming pools.

### **3) Federal Tax return:**

A copy of the previous year's federal tax return.

### **4) Connection Fee Amount**

We need to know how much the connection fee is.

### **5.) Bids:**

3 bids from contractors for sewer connection from house to cleanout. The lowest bid amount will be used.

<b><u>For More Information Contact:</u></b>	<b><u>Mail Application To:</u></b>
Latoya Reeder 301-609-6751 Well & Septic Program <a href="mailto:Latoya.reeder1@maryland.gov">Latoya.reeder1@maryland.gov</a>	Charles County Department of Health Environmental Health Services 4545 Crain Highway P.O. Box 1050 White Plains, MD 20695